

Maahara digest

ISSUE 01

RISE: RESEARCH TO PRACTICE



Transparency Maldives, the National Chapter of Transparency International in The Maldives, is a non-partisan organization that promotes collaboration, awareness and undertakes other initiatives to improve governance and eliminate corruption from the daily lives of people. Transparency Maldives views corruption as a systemic issue and advocates for institutional changes that will punish and prevent corruption.



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INTRODUCTION

“There was a time when drug prevention was limited to printing leaflets to warn young people about the danger of drugs, with little or no resulting behavior change. Now, science allows us to tell a different story. Prevention strategies based on scientific evidence working with families, schools and communities can ensure that children and young people, especially the most marginalized and poor, grow and stay healthy and safe into adulthood and old age” (UNODC, 2018a).

Studies from all over the world are increasingly showing that substance use problems usually arise from “a combination of individual, family, school, and community related factors” (UNODC, 2018b). It is no question then, that any effort for drug prevention must take into account the root causes and contributing factors at an individual, societal, community and policy level and are contextualized accordingly to best reach and help target populations.

“For every dollar spent on prevention, at least ten can be saved in future health, social and crime costs.”
(UNODC, 2018a)



The first issue of Mahara Digest focuses on a local drug prevention project implemented by Journey, a non-governmental organisation dedicated to promoting drug prevention and treatment, addressing societal stigma, and supporting recovery. The issue will concentrate on their project RISE, as well as the risk and protective factor assessment conducted in HDh. Kulhudhuffushi.

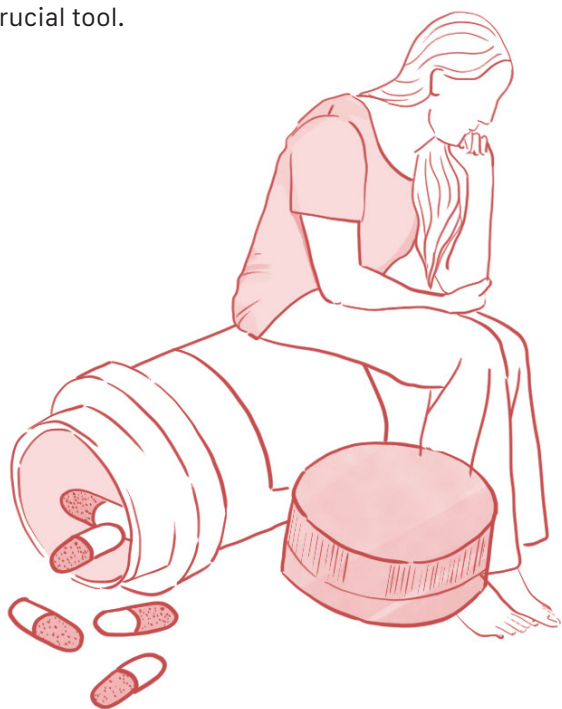
The figures and data pertaining to the Kulhudhuffushi community published in this issue are drawn from Journey’s assessment. Transparency Maldives consulted Journey, Journey’s Alliance in HDh. Kulhudhuffushi, and HDh. Kulhudhuffushi City Council for additional input.



RISK AND PROTECTIVE FACTORS

WHAT ARE THEY?

In the same way that any effective treatment is contingent on an effective scientific diagnosis, drug prevention programs are effective when they can identify and respond to a community's needs and gaps based on scientific evidence and research. In terms of drug prevention, the risk and protective factor theory is a crucial tool.



Risk and Protective Factor theory

The risk and protective factor theory is used to "identify aspects of a person and his or her environment that make the development of a given problem less or more likely" (UNODC, 2018b). Risk and protective factors ultimately influence individual behaviours such as propensity to engage in substance abuse.

International best practices recommend that "risk" and "protective" factors that "most directly promote health or, conversely, contribute to substance use problems in the population of interest" should be addressed (UNODC, 2018b) in the promotion of drug prevention.

In this context, risk factors are those aspects that predispose the community and increase the chances of young people engaging in behaviors such as substance abuse. According to the Substance Abuse and Mental Health Services Administration (SAMHSA) of the U.S. Department of Health and Human Services, it can be any biological, psychological, family, community or cultural characteristic that precedes and increases the likelihood of engaging in adverse behaviors (SAMHSA, 2022). This could include factors like (UNODC, 2018Bb) (Journey) :

Breakdown of family units

Norms and attitudes towards rising substance abuse

Lack of parenting awareness

Quality of school experience

Weak relations with neighbors

Exposure to peer pressure and antisocial behaviors

Conversely, "protective" factors are those aspects that can safeguard against these acts. These are those characteristics at the individual, family, or community level that decreases the likelihood of engaging and initiating negative behaviours. (SAMHSA, 2022) This may be aspects such as (UNODC, 2018Bb) (Journey) :

Strong family units

Collaboration between community, families and stakeholders

Better parenting awareness

Promotion of education

Strong relations with

Increased autonomy, agency, and sense of belonging



A LOCAL PROJECT RISE BY JOURNEY

“So what should be our objective?”

Reduce Risk factors and Increase Protective factors” – Journey NGO

Assessing a community’s level of risk and protection can thus serve as the foundation for research-based, locally contextualized planning and policy formulation. In this regard, **Journey**, a local NGO with a mission to help substance users recover and reintegrate back into society as productive citizens has been carrying out their project “RISE,” a research-based drug prevention program that mobilizes various actors and stakeholders in the community.

Journey

Journey is a Maldives-based non-governmental organization that was established in 2005 to combat the societal stigma associated with addiction and recovery. With its activities and reach across the country, Journey has become a well-established organization in the community with activities carried out in **24 inhabited islands and 8 resorts** so far.



16940
Beneficiaries
*through various
outreach interventions
since inception*



4825
Referrals
*Provided referrals
for treatment
programs*



20-30%
Recovery Rate

One of their key focuses is to help individuals with substance use disorders to access treatment, and support them in reintegration. They are one of the most well-known groups in the country, having received numerous national accolades, including the National Youth Award 2013 for “Outstanding Work in the Betterment of Society”. Journey also works closely with communities, and has established community networks for on-the-ground mobilisation such as Journey’s Alliance in HDh. Kulhudhuffushi which is comprised of various community-based actors.

Due to a lack of adequate state-level programs and a national focus on drug prevention, Journey launched RISE, a research-based program for drug prevention in **2012**. During its inception and pilot phase in 2012, the RISE Program utilized the Preventing Drug use among Children and Adolescents – A Research-Based Guide for Parents, Educators, and Community Leaders: Second Edition, developed by the National Institute on Drug Abuse, USA, (NIDA, 2004) as a foundational framework. Subsequently, with the release of the first International Standards on Drug Use Prevention by UNODC in 2013, the RISE Program underwent a revision to conform to these guidelines. Presently, the RISE Program adheres to the updated Second Edition of the UNODC/WHO standards, which were released in 2020.

RISE

16 Islands

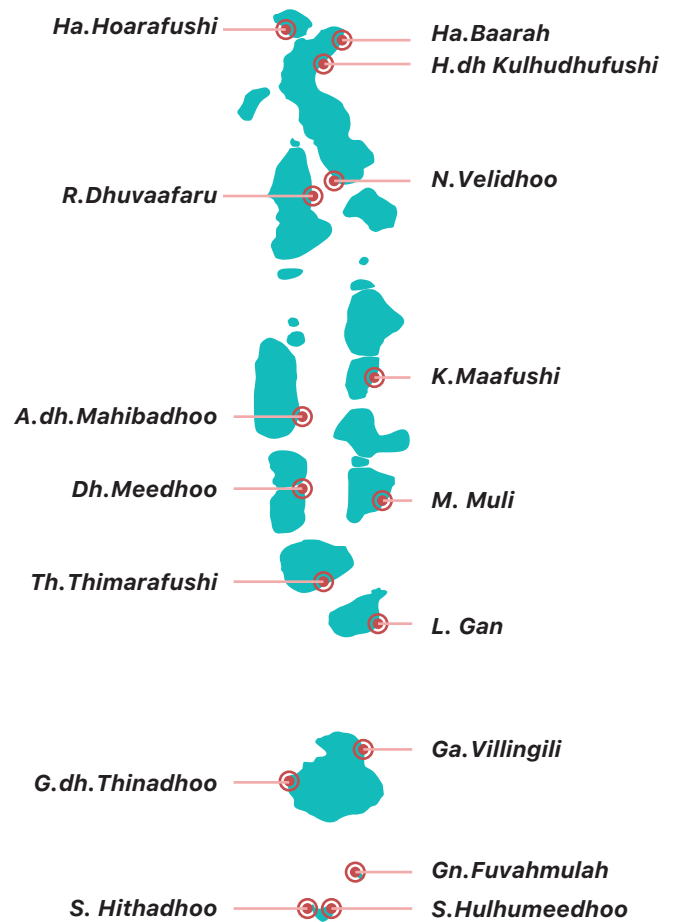
15000 Direct Beneficiaries

By the end of 2022, Journey has already conducted RISE in 16 islands, and reached 15000 direct beneficiaries, including youth, parents, policy makers and the general public.

According to international best practices and NIDA guidelines, the first step of "RISE" is to identify the risk and protective factors in local communities. In this regard, Journey has already conducted an assessment of risk and protective factors in their key locations:

A.dh.Mahibadhoo, Dh.Meedhoo, G.dh.Thinadhoo, Ga.Villingili, Gn.Fuvahmulah, H.dh Kulhudhufushi, Ha.Baarah, Ha.Hoarafushi, K.Maafushi, L.Gan, M.Muli, N.Velidhoo, R.Dhuvaafaru, S.Hithadhoo, S.Hulhumeedhoo, and Th.Thimarafushi.

As mentioned earlier, this issue of the Maahara Digest will focus on the risk and protective factor assessments that was conducted by Journey in Kulhudhuffushi City. According to Kulhudhuffushi City Council, the urban city is becoming increasingly concerned about the rising number of substance abusers, with around **800** people already exposed to substance abuse and addiction. The council also stated that roughly **80%** of users on the island are injecting drug users, which carry the risk of overdose, emphasizing the growing need to assist in treating them and preventing substance abuse from worsening in the community.

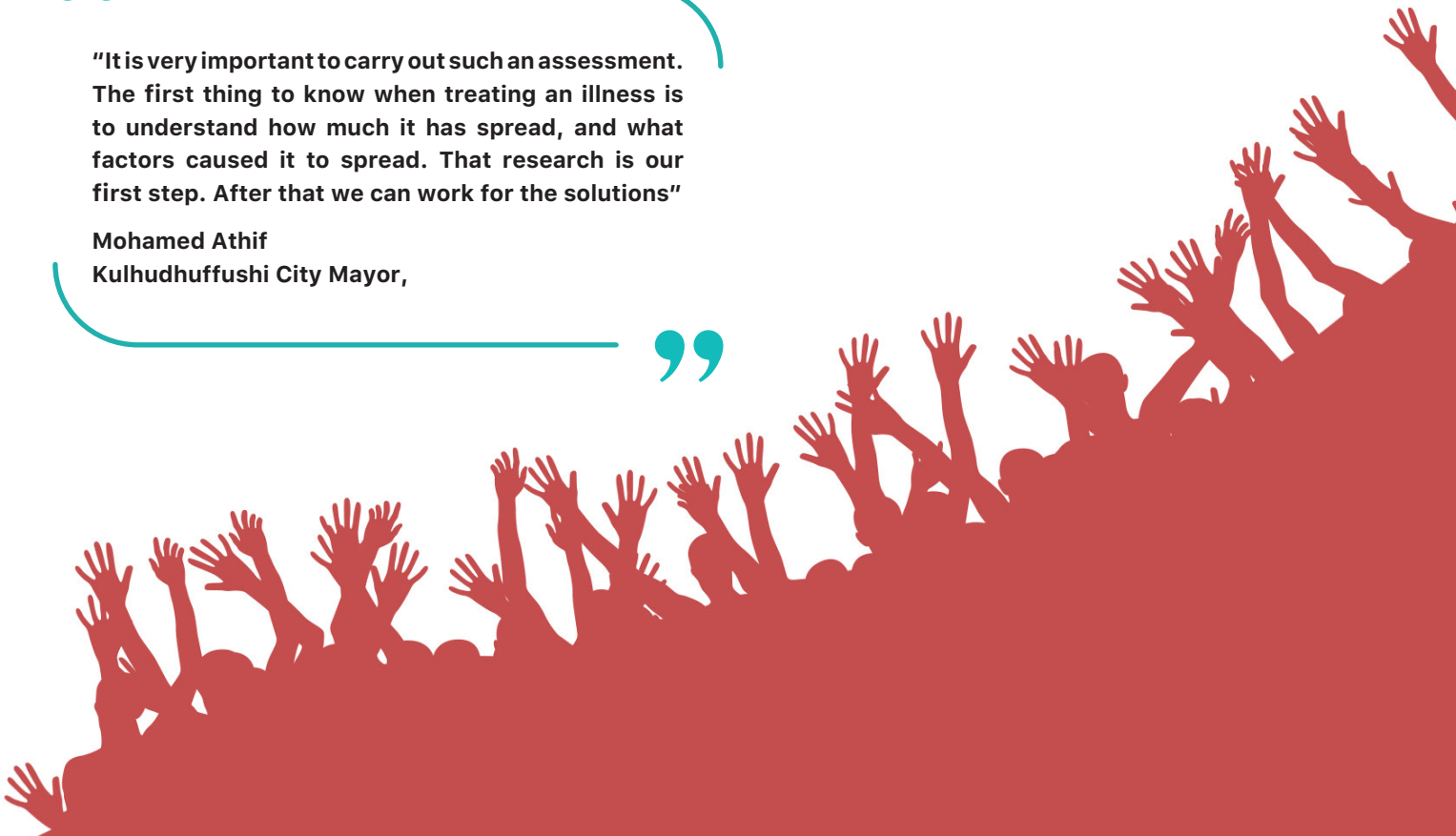


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“It is very important to carry out such an assessment. The first thing to know when treating an illness is to understand how much it has spread, and what factors caused it to spread. That research is our first step. After that we can work for the solutions”

Mohamed Athif
Kulhudhuffushi City Mayor,

”



THE WHY, WHAT AND HOW

THE WHY

Journey conducts the risk and protective factors study. The study is a crucial step carried out before the implementation of the prevention program. As part of the RISE program to better understand the factors that influence youth substance abuse behaviors. The results of such assessments do not necessarily serve as evidence of harmful behaviors and practices, but rather demonstrate the community's perception. Understanding the community, their perspectives, needs, and concerns in this regard is critical for any substance abuse prevention effort.

THE WHAT

The assessment carried out by Journey under RISE looks at **5** key domains in which risk and protective factors can influence substance abuse:

1. Within society

4. Within individuals (youth)

2. Within the school environment

5. Within peers or social circles

3. Within families

THE HOW

The assessment involves gauging community perceptions of the prevalence of various factors across each of these key dimensions and is administered to a variety of community groups such as parents, members of CSOs, students, unemployed youth, self-employed youth, and those working in governance, civil service, and education. The assessment of risk and protective factors in Kulhudhuffushi included a total of **182** respondents, **72%** of them were women and the remaining **28%** were men.

The responses of the community determine whether each of these determinants, their prevalence or absence, are risk factors or protective factors. This is accomplished through the use of a rating system ranging from **"Mostly Agree," "Agree," "Neutral," "Disagree,"** and **"Mostly Disagree"** to ascertain respondent impressions of whether various environmental elements constituted a risk factor or a protective factor. For example, if a majority of respondents reported that youth in the community grew up feeling alienated or disenfranchised from community activities, this would be scored as one risk factor. The scores are then tallied together to better assess the community's overall resilience, whereas focused analysis can help identify specific areas of intervention that are most needed.

WHAT DID THE ASSESSMENT FIND?

The risk and protective factors in Kulhudhuffushi aided in understanding the general landscape, the community's level of exposure to substance abuse, and, more importantly, the dimensions in which risks were most prevalent.

1: SOCIETY

The first dimension assessed risk and protective factors within the society. This dimension was assessed by understanding factors such as:

norms and laws surrounding substance

availability of resources and basic necessities

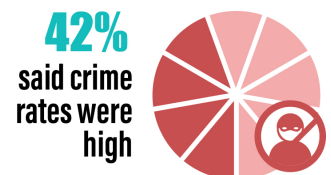
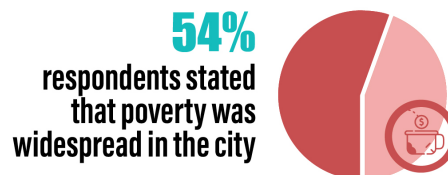
opportunities for economic growth

level of community attachment and organization

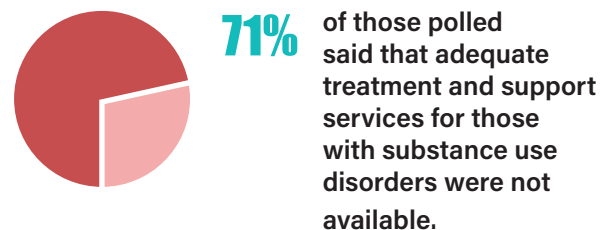
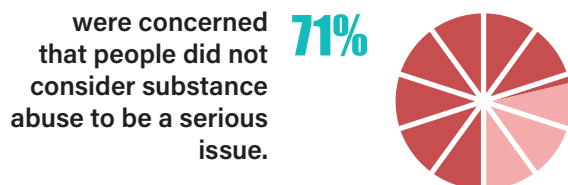
policies relating to the availability of substances

opportunities for prosocial involvement

In this regard, when asked about the socioeconomic environment of Kulhudhuffushi City, **77%** of respondents described it as a busy city. Respondent's views on public safety, prevalence of crime and economic situation were also gauged within the study which found that:



When asked about norms and laws surrounding substance abuse:



Drugs are widely available in the city, according to **29%** of respondents. Furthermore, **45%** of respondents say that people are unaware of drug-related laws, and **74%** believe that such laws are poorly enforced in the city.

In terms of community engagement and organization, **38%** of respondents thought that families, schools, and the community functioned effectively together. However, **33%** of respondents did not believe there is a sense of community or support in the community. On a positive note, **60%** of respondents stated that island-level programs and activities are carried out in an organized manner.

2: SCHOOL

The second dimension assessed the risk and protective factors within the school environment. This dimension was assessed by understanding factors such as:

Clarity in academic and behavioral expectations

Bullying

Academic failure

Opportunities and recognition of prosocial involvement

Commitment to school

Responsiveness to student needs for prosocial involvement

When features of the school environment were evaluated, there were mixed reviews as to whether the school atmosphere was favorable and nurturing, with just **37%** agreeing that it was. When asked if the school maintained a positive relationship with pupils, **37%** said yes. They were less clear, however, about whether kids were interested in participating in school activities, with **27%** agreeing and **27%** disagreeing, and the remaining being neutral.



37%

said the school maintained a positive relationship with pupils

A more optimistic outlook was noted in terms of student performance, with **44%** believing that students were generally academically well-inclined. In reality, **46%** of respondents thought that students have achieved numerous accomplishments in a variety of fields, and **63%** believed that students generally participated in extracurricular activities. Nonetheless, more than half of the respondents reported that even pupils in lower grades showed various behavioral concerns (**57%**) and academic weaknesses such as poor grades (**59%**).

Teachers' knowledge of substance addiction issues was also evaluated. In this aspect, **53%** believed that teachers were knowledgeable about the subject and pushed against substance misuse. Furthermore, **51%** believe that teachers are knowledgeable about life skills, which can be a critical safeguard in shaping young minds.

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“We can have many programs. We already know the issues. The first step is however, to believe we actually have a problem. Sometimes even institutions don't want to acknowledge the severity of this issue. Or they want to downplay the negatives. For example schools may deny that substance abuse is prevalent among their students as well. The result is that students who actually need and even those who seek help on their own end up not getting the help they need. Parents can't always get this help on their own. Every institution is relevant in this issue. It's a matter for joint contribution – not a matter to point fingers and blame.”

-A parent, Kulhudhuffushi City

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“There are students who've gone through trauma, those who have dropped out of school, and even those seen as “high performing” and those in high positions who are using as well. The difference however is that the poor do not always have a way – whereas those who are affluent have the opportunities and access to get out of it”

- A parent, Kulhudhuffushi City

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3: FAMILY

The third dimension assessed the risk and protective factors within families. This dimension was assessed by understanding factors such as:

Family history of substance abuse

Abuse, mistreatment, trauma and exposure to violence

Poor family management

Parental involvement and childrearing practices

Divorce and family breakdowns

This assessment included a look at family-related vulnerabilities. In this regard, a total of **65%** of the respondents were aware of fragile family units and frequent family breakdown. There are **66%** of respondents who reported of families with a history of substance misuse, and **45%** which reported that some parents do not consider it a significant concern even if their child has a substance abuse disorder. In fact, a total of **62%** stated that even some parents are involved in substance abuse themselves.



65%

reported of weak family units



66%

reported knowing families with a history of substance misuse

Better parenting skills and well-educated parents are two examples of family related protections. In Kulhudhuffushi, the general parenting style received mixed evaluations, with only **22%** of respondents agreeing that parents are responsible and effectively monitor their children's behavior. Nonetheless, **43%** of parents stated that when it comes to their children, parents often work well together.



4: YOUTH

The fourth dimension assessed the risk and protective factors as individuals assessed among the youth population. This dimension was assessed by understanding factors such as:

Anti-social behaviours

Rebelliousness

Poor cognitive development

Emotional control and inhibitions

Sense of identity and security

Mental wellbeing

When individual risk and protective factors were evaluated within the domain of youth, it was discovered that the Kulhudhuffushi youth community required immediate attention to reduce the prevalence of risks. According to the majority of respondents (**66%**), some youth on the island have experienced family dysfunction. Respondents also acknowledged the frequency of abuse and trauma among youths, noting that some youth were subjected to



69%

Physical Abuse



70%

**Mental abuse
and intimidation**



66%

Sexual abuse



65%

**exposure to
age-inappropriate media**

A person's history of abuse and trauma might be major risk factors for drug dependency. In fact, **73%** of respondents said that some adolescents began smoking tobacco at a young age, and 74% reported that some youth began substance abuse at a young age. According to **41%** of those polled, youth do not have enough information on the dangers of drugs.

When attitudes and norms around substance use were assessed, **61%** of respondents reported that some kids do not believe engaging in harmful behaviors is particularly serious or problematic. A total of **41%** reported of some youth engaging in behaviors that violated the public code of conduct and social standards. Furthermore, **60%** of respondents reported youth engaging in reckless and dangerous behavior, and roughly half (**50%**) of respondents stated that youth of the city experienced social isolation.



50%

**stated that youth of
the city experienced
social isolation**



"The society is quick to label users as a "partey" – I don't believe in this. We label them now but this happened because we failed to take responsibility as a community"

- A parent, Kulhudhuffushi City



"Sometimes youth believe this is a positive thing. They want to feel happy and have no healthier replacements for this happiness. There isn't enough information or facilities for healthy coping mechanisms - there simply isn't enough opportunities"

- youth, Kulhudhuffushi City



5: PEERS

The fifth dimension assessed the risk and protective factors among peers and social circles. This dimension was assessed by understanding factors such as:

Pressure, rejection and bullying by peers

Opportunities to engage in healthy, safe activities

Gang involvement

Social skills

Sense of community and belonging

Rewards for antisocial involvement

When risk factors among peers and social circles in Kulhudhuffushi was assessed, only a mere **10%** of the respondents were confident that social/ peer circles among youth understood and distinguished between good and bad behaviours. Meanwhile, half of the respondents stated that there were individuals whose friends or peers engaged in substance abuse and **57%** informed that some have lost a friend or peer to suicide.

When social attitudes around substance abuse was assessed, over half (**54%**) stated that they felt like substance abuse was not regarded as a serious issue in some social circles while **58%** stated that they have observed some peers or youth in the community who do not place importance on the code of conduct and social norms. Nonetheless, half of the respondents (**50%**) stated that there were individuals who gravitate and associate with peers who work for the betterment of the community as well.



WHAT'S NEXT?

UNDERSTANDING THE RELATIONSHIP BETWEEN RISK AND PROTECTIVE FACTORS

Identifying risk and protective factors is only half of the equation. Understanding the dynamics of such factors and their relationships is required for meaningful and impactful application of this knowledge. One of the most important things to remember about risk and protective factors is that they change over time and with the availability of better socioeconomic mobility, opportunities, as well as improvements of individual autonomy, identity, security, and a sense of belonging. The level of risk or protection provided by any of the assessed aspects is also dependent on the persistence, density, and magnitude of these factors. So, how can this dynamic interplay of risk and protective factors be better understood?

RESILIENCY:

“Resiliency can be seen as a balance between stress and adversity (risk factors) on the one hand and the ability to cope and the availability of support (protective factors) on the other.” (UNODC)

Resiliency in this regard is also highly contingent on community solidarity. On-the-ground grassroots mobilization by community members can go a long way in safeguarding the community against harmful behaviours, and can be a powerful catalyst of meaningful change.

Such mobilization is also observed in Kulhudhufushi City by Journey’s Alliance – a network of community members consisting of parents, teachers and youths, who work on the ground to raise awareness and provide support to those struggling with substance use disorder.

The increase in protective factors improves resilience. The prevalence of risk factors, on the other hand, weakens resiliency. However, the number of risk and protective factors does not always determine resiliency or the lack of it. The impact and implications of these factors are also related to an individual’s level of vulnerability. Aside from psychosocial underpinnings and surrounding socioeconomic conditions, the age of individuals appears to be related to their proclivity to initiate substance use as well. For instance, aspects related to parenting and the school environment are particularly influential during stages of infancy, childhood, and early adolescence, whereas factors relating to media, workplaces and peer pressure may be more influential to older age groups.

Therefore, understanding the balance between risk and protective factors, and as such, the level of resiliency also calls into question the frequency, severity, duration as well as the developmental stage or age at which they occur (UNODC, 2018).

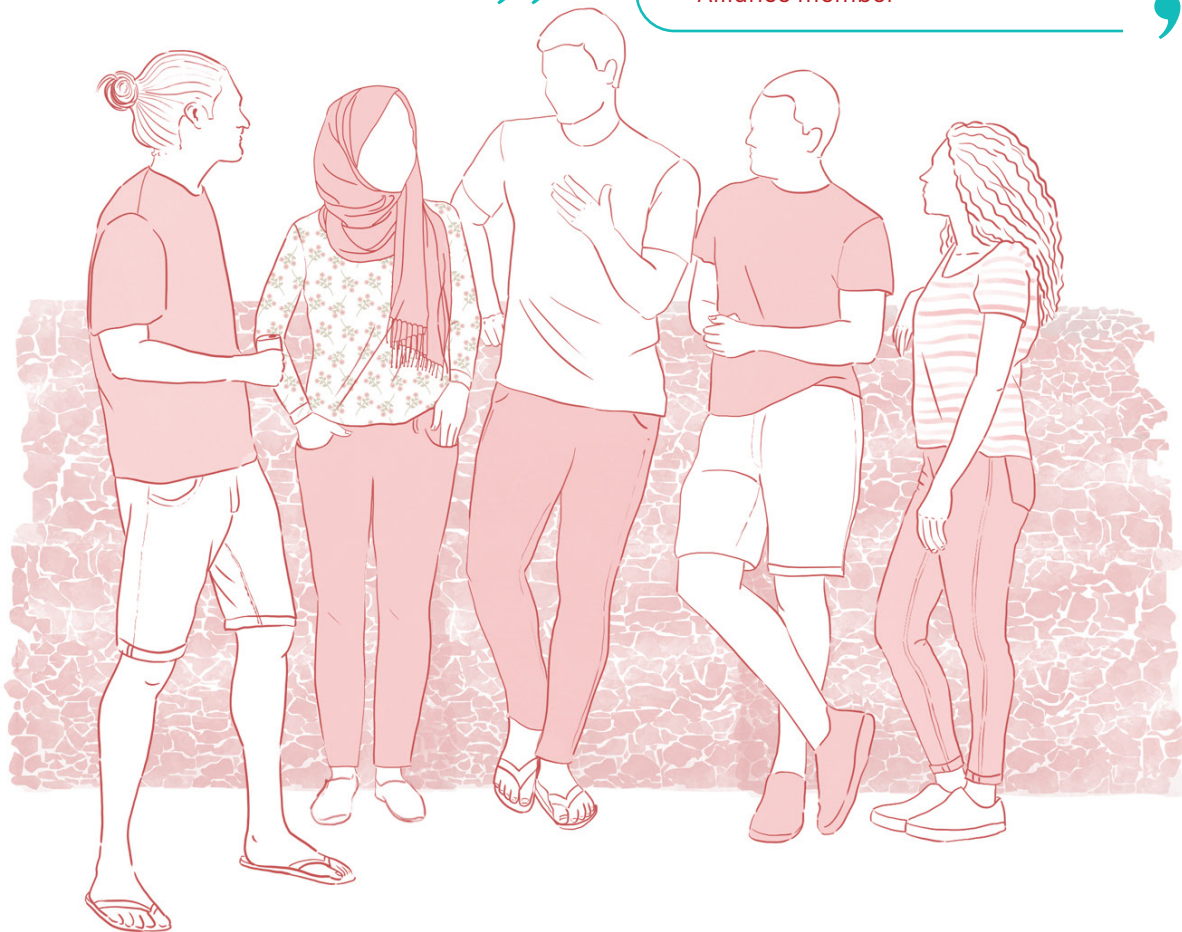
SHAPING REALITY: KNOWLEDGE TO IMPACT

The significance of conducting a risk and protective factor assessment in any drug prevention effort cannot be forgotten. The next step, however, is not about learning but about applying what you've learned. This begs the question, who bears this responsibility? Is it the government? Or civil society? Parents? Or schools?

In a nutshell, the answer is no one party. Rather, any successful drug prevention effort necessitates the active participation, engagement, and mobilization of a wide range of stakeholders and groups. It's not a one-track path, but rather a call for joint effort. The efforts of Journey and the RISE program are remarkable noteworthy, but there are many limitations and resource constraints, as with any civil society effort. These difficulties are further magnified for smaller CSOs across the country.

“We can have programs, conduct surveys, take sessions. But often times these programs depend on the availability of funding, and not always the impact. When the funding stops, the program stops. But these programs need to have more continuity if we want to see continuous impact”
- Alliance member

“There are many CSOs in this island – but most focus on sports. There is always some annual tournament, but I don't see them working for social issues as much. Few CSOs do focus on such issues, but it's not enough. Sports activities can play a key role on social cohesion, but they can do more by proactively promoting good messages.”
- Alliance member



Policy gaps that necessitate policymakers' involvement and attention, as well as the involvement and awareness of the community on the ground who understands the lived realities best, are equally important and indispensable. And the Kulhudhuffushi community agrees.

Everyone is aware of the growing problem of substance abuse among Maldivian youths in terms of magnitude and severity. Approximately **80%** of those incarcerated are carrying sentences for drug-related offenses (UNDP, 2019). The impact of evidence-based research is only useful if it is used to inform policy formulation and planning. And the implementation of these policies and plans on the ground requires the participation of everyone in the community, including governments, councils, civil society organizations, media, schools, parents, and community groups alike.

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“Drug prevention needs to be a national problem. This is a big problem our country is facing. Our young labor force is weakening, and a big percentage of the youth population is losing their future prospects to spreading substance abuse. This is a problem that calls for national level focus and policy changes. These policy changes should aim to empower local governments, build their resource capacity, carry out national and local level assessments and address gaps in the legal system.”

– Kulhudhuffushi City Mayor

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“We need more joint efforts. Everybody has the same goal – Prevention.”

– Youth, Kulhudhuffushi City

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“RISE programme was really good and helped open my eyes to various social issues and that we had a role to play in the society”

– A parent, Kulhudhuffushi City

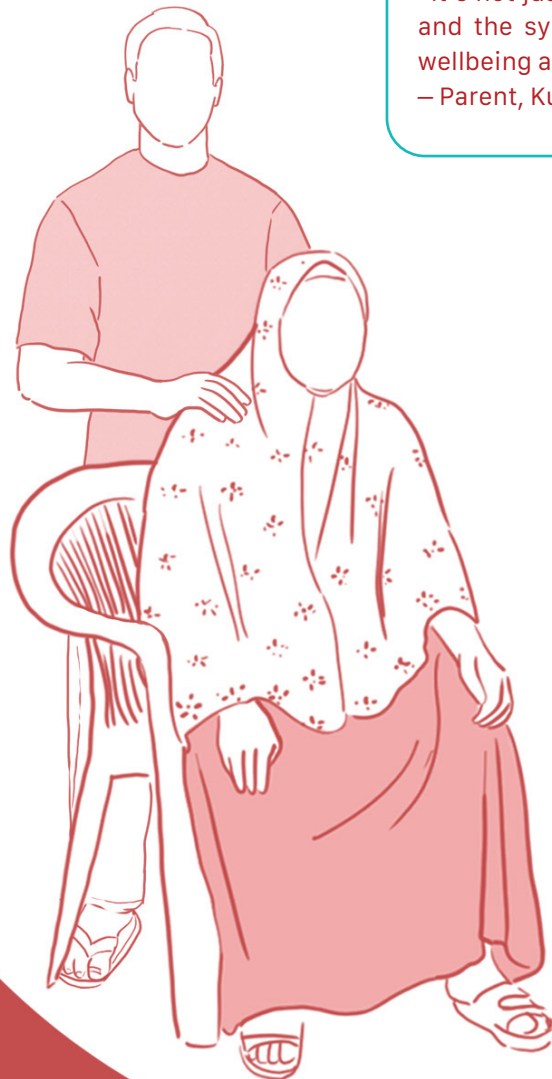
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“It’s not just parents, but schools, society and the system that impacts the child’s wellbeing as well”

– Parent, Kulhudhuffushi City

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As a result, the risk and protective factor assessment in Kulhudhuffushi provides some important insights into what the next actions might be. The community's perspectives reflect the need for various levels of action and community engagement, such as:

1. Increasing knowledge and information about substance abuse and drug dependence among parents, teachers, students, and youth to improve norms and attitudes against substance usage.
2. Improving coordination and collaboration among various community organizations, from those in governance to those on the ground, in order to help individuals, access adequate treatment and effectively implement drug-related legislation.
3. Expanding possibilities for adolescents and youth to participate in pro-social movements and community service.
4. Fostering ideals of tolerance, acceptance, and nondiscrimination in schools and society at large.
5. Establishing a community support system and providing individuals with access to psychosocial care who are dealing with family breakdown and dysfunction, abuse, trauma, and loss.
6. Expanding avenues for youth empowerment and constructive social participation.

As a result, it can be inferred that a community solution and a whole-of-society approach is crucial. The voices and sentiments of Kulhudhuffushi community members highlight the necessity for such an approach as well. The message that their concerns convey is clear: we need to expand our efforts, attention, and collaboration in providing individuals struggling with substance abuse with the care they require and supporting their social re-integration as productive members of society.



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 - Ahmed Nazim, Chief Operations Officer
 - Ali Adyb, Global Drug Demand Reducing Master Trainer
- Journey Alliance – HDh. Kulhudhuffushi City (November 2022)
- HDh. Kulhudhuffushi City Council (November 2022)



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